

Application No.: 10/675,135



Docket No.: 30810/39676A

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: May 16, 2005

Signature:

(Roger A. Heppermann)

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:  
Michael J. Brookman

Application No.: 10/675,135

Confirmation No.: 5725

Filed: September 29, 2003

Art Unit: 3743

For: Powered Air Purifying Respirator System and  
Breathing Apparatus

Examiner: Aaron J. Lewis

### AMENDMENT A

MS Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

### INTRODUCTORY COMMENTS

In response to the Office Action dated December 16, 2004 please enter the following amendments and consider the following remarks with respect to the above-identified U.S. patent application.

**Amendments to the specification** begin on page 2 of this paper.

**Amendments to the claims** can be found in a listing of the claims which begins on page 3 of this paper.

**Amendments to the drawings** begin on page 8 of this paper.

**Remarks/Arguments** begin on page 9 of this paper.



## AMENDMENT TRANSMITTAL LETTER

Docket No.  
30810/39676A

Application No. 10/675,135-Conf. #5725	Filing Date September 29, 2003	Examiner Aaron J. Lewis	Art Unit 3743
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Applicant(s): Michael J. Brookman

Invention: Powered Air Purifying Respirator System and Breathing Apparatus

### TO THE COMMISSIONER FOR PATENTS

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	15	- 20 =	0	x	
Independent Claims	2	- 3 =	0	x	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify): Extension for response within second month IDS					225.00 180.00
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>					405.00

Large Entity

Small Entity

No additional fee is required for this amendment.

Please charge Deposit Account No. \_\_\_\_\_ in the amount of \$ \_\_\_\_\_. A duplicate copy of this sheet is enclosed.

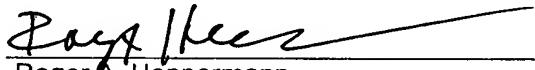
A check in the amount of \$ 405.00 to cover the filing fee is enclosed.

Payment by credit card. Form PTO-2038 is attached.

The Director is hereby authorized to charge and credit Deposit Account No. 13-2855 as described below. A duplicate copy of this sheet is enclosed.

Credit any overpayment.

Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.



Dated: May 16, 2005

Roger A. Heppermann  
Attorney Reg. No.: 37,641

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Attorney Docket No.: 30810/39676A

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PTO/SB/08